

# Electronic Application to express interest in participating in WMO Activities

**Please fill out this questionnaire:**

**Your Title:**

**Your Family Name:**

**Your name:**

**Your Job Title:**

**Name of Organization:**

**Area of Professional interest/expertise:**

**Your Email Address:**

**Telephone Number:**

**Previous experience in WMO activities?**

(If yes, please send a brief description of WMO experience including approximate dates of experience, by email to: [William.Bolhofer@noaa.gov](mailto:William.Bolhofer@noaa.gov))

☐ **Other**

## **TO SEND THIS FORM:**

**(Option 1:) Complete this form. Save to your PC. Then send this form as an attachment to: William.Bolhofer@noaa.gov**

**Thank you for responding to this questionnaire.**